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UTILITY PATENT APPLICATION **TRANSMITTAL**

Please type a plus sign (+) inside this box → +

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorne	Attorney Docket No.		044502.0017					
First N	amed Inventor or Application	ldentifier	Troy Squires					
Title	Horizontally Drainir Field	ngineered Synth	etic Turf					
Express Mail Label No.		EL 70472	04727504 US					

APPLICATION ELEMENTS				ADDRESS TO:			TO:	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231				
See MPEP Chapter 600 concerning utility patent application contents 'Fee Transmittal Form (e.g., PTO/SB/17)					_		Microfiche		Program (A		80	
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4. Oath or Declara	tion lemental Declarati		[Total Pages	3	1	10.		English Tr	anslation D	ocument (if	applicable)	
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for continuation/divisional with Box 17 completed) [Note Box 5 below]				,		13.	1	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
<u>DELETION OF INVENTOR(S)</u>						14.		Small En			ent filed in prio still proper and	
Signed statement attached deleting inventor(s) named in the prior application,								Statement (PTO/SB/	/09-12)			dealled
		CFR§1.63(d)(2)				15.			Copy of Pric priority is cla	ority Docum aimed)	ent(s)	
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NAME	Russell C.		Have C	Palet 1								
Akin, Gump, Strauss, Hauer & Feld, L. ADDRESS 816 Congress Avenue, Suite 1900					.L.P.							
ADDRESS 816 Congress Avenue, Suite 1900 CITY Austin STATE Texas							ZI	P CODE	78701			
COUNTRY	U.S.A.	TE	LEPHONE	(512) 4		200				FAX	(512) 499	-6290
Name (Print/Type)		Russell C	Scott				Re	gistration	No (Atto	nev/Agen	t) 43,1	03
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Signature	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Russ	ill	<u></u>				/		<i>DATE</i> 03/14/01		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

PTO/SB/17 (1/98)

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	FEE IRAN		Application Number Not yet assigned							
	Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997				Filing Date March 14, 2001 First Named Inventor Troy Squires					
	Small Entity payments must be sup					Name	110y 3qi	ulles		
ı	otherwise large entity fees must be paid. See Forms PTO/SB/09-12.				Anticipated Examiner Name Anticipated Group / Art Unit					
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ì	METHOD OF PAYMENT					FEE (CALCULATIO	N (continued)		
Ī	1. The Commissioner is hereby authorized to charge to the following			ADDIT	IONAL	. FEES				
	Deposit Account Number	01-0660	Large Fee	Entity Fee	Small Fee	Entity Fee				
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ŀ		dictionary crospay	147	2,520	147	2,520	For filing a reque	st for reexamination		
	2. 🔀 Payment Enclosed:			920*	112	920*	Requesting publi Examiner action	cation of SIR prior to		
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ſ	FEE CALC	ULATION	115	110	215	55	Extension for rep	ly within first month		
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303	Total Claims 1 -20**= 0		126	240	126	240		formation Disclosure Stm		
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	**or number previously paid, if greater; For Reissue, see below 103 18 203 9 Claims in excess of 20				specify)	examineu (S7 C	11 1.129(0))		
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Ĭ	SUBMITTED BY						Complete (if app	licable)		
ŀ		Russell C. Scott			•			Reg. Number	43,103	
ľ	Typed or Printed Name Signature					ate		Deposit Account User ID	01-0660	
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